

CH2M HILL Hanford Group, Inc.	Manual	ESHQ
INJURY AND ILLNESS EVENTS	Document	TFC-ESHQ-S_CMLI-C-02, REV B-2
	Page	1 of 7
	Issue Date	March 24, 2008
	Effective Date	March 24, 2008

[Ownership matrix](#)

1.0 PURPOSE AND SCOPE

This procedure provides direction for responding and reporting injuries and illnesses. This procedure also establishes requirements to ensure that prompt medical treatment is obtained in accordance with OSHA requirements. ([7.1.1](#), 7.1.2.a, 7.1.4.a, 7.1.4.b, 7.1.5)

2.0 IMPLEMENTATION

This procedure is effective on the date shown in the header.

3.0 RESPONSIBILITIES

3.1 Affected Worker

1. Report all occupational injuries or illnesses to their immediate manager, immediately upon discovery, including any injuries or illnesses that may occur off site (e.g., Hammer Training Facility).
2. Shall report to an [Onsite Medical Provider \(OSMP\)](#) ~~OMSP~~ Health Care Center for evaluation as soon as possible but no later than the next scheduled shift under the following circumstances:
 - When instructed to do so by management
 - When instructed to do so by the Hanford Fire Department
 - When incurring an occupational injury not meeting self-treat criteria
 - When incurring a chemical exposure
 - When incurring a potential chemical exposure.
3. If the injury is discovered after work hours, or if the worker needs medical treatment beyond initial treatment after work hours, notify the manager no later than at the beginning of the next work shift, or if scheduled to be off, notify the appropriate Shift Manager immediately.
4. When returning to work following an injury or illness follow [TFC-BSM-HR_AT-C-01](#).
5. Complete the employee portion of the Event Report with supervisor or facility safety representative.

3.2 Employees Immediate Supervisor

1. Accompany the employee to a medical facility and provide assistance to ensure that the employee's immediate needs are met (notification of family members, arranging transportation, and other assistance as needed).

2. Shall instruct employee to report to an ~~OSMP-OMSP~~ Health Care Center for evaluation as soon as possible but no later than the next scheduled shift under the following circumstances:
 - When the employee has been instructed to do so by the Hanford Fire Department
 - When instructed to do so by management
 - When the employee has incurred an occupational injury not meeting self-treat criteria
 - When the employee has incurred a chemical exposure
 - When the employee has incurred a potential chemical exposure.
3. Provide periodic notification to appropriate Shift Manager regarding the status of the injured/ill employee.
4. Provide management with details of event, as they become available.
5. Complete Event Report and provide to Facility Safety and Health Professional within shift of occurrence.
6. When employees return to the work following an injury or illness follow the procedure [TFC-BSM-HR_AT-C-01](#), and [TFC-BSM-HR_EM-C-04](#).

3.3 Shift Manager

1. Upon being notified, provide appropriate level of assistance to reporting individual.
2. Notify appropriate facility Safety and Health Professional, Injury & Illness Case Management, and Senior Management representative of event.

3.4 Facility Safety Professional

1. Participate in the preliminary investigation of the event and assist the affected worker's manager in completing Event Report, as requested.
2. Provide completed Event Report to Injury & Illness Case Management within shift of occurrence.
 - a. When the employee is unavailable to sign the event report:
 - 1) Complete the event report with the supervisor and employee within 24 hours of the event.
 - 2) If the event report requires more than 24 hours to complete, notify the Industrial Safety manager.
 - b. Conduct field investigation, with HAMTC Safety Representative, of event to identify potential causes and corrective actions.

4.0 PROCEDURE

During scheduled work hours, a member of management or designee shall accompany all injured or ill employees to any medical facility that provides treatment to the affected worker and remain with the employee until the employee is released or both agree that assistance is no longer necessary. Primary Care Medical Facilities are:

- AdvancedMed Hanford (AMH):
 - North Area: 200W/2719-WB, 373-2714
 - South Area: 1979 Snyder Street, Richland, WA, 376-6981
- Kadlec Medical Center: 888 Swift Blvd., Richland, WA, 946-4611
- Kennewick General Hospital: 900 Auburn Street, Kennewick, WA, 586-6111.

4.1 Responding to Injuries and Illnesses

4.1.1 Medical Emergency Events

Medical emergency events include, but are not limited to, breathing difficulty, loss of consciousness, severe bleeding, electrical shock, chest pain or pressure, broken bones. See Figure 1.

Responding
Employee

1. Dial 911 (373-3800 on cell phones) for all emergency events.
2. Provide assistance to injured/ill employee, which may include rendering first aid treatment.
3. Remain with the injured/ill employee until the Hanford Fire Department (HFD) has arrived on the scene.
4. Provide pertinent information as requested by HFD.
5. Notify the affected employee's management, if known, or appropriate Operations Shift Manager.

4.1.2 Non-Emergency Medical Events

Non-Emergency medical events that require medical attention beyond minor first aid.

Responding
Employee

1. Provide assistance to the affected employee, which may include rendering first aid.
2. Notify the affected employee's management.
3. Direct the affected employee to the nearest Site Medical Provider or nearest Primary Care Medical Facility.

4.1.3 Minor Medical Events

Minor medical events include scratches and lacerations. Events that are minor in nature may be self-treated if agreed upon by the affected employee ~~and~~ his/her immediate supervisor, ~~and approved by the supervisor's management.~~ Strains and sprains are not considered minor medical events.

4.1.4 Exposure Event

Medical care following possible chemical exposure shall be provided for an employee under the following circumstances:

- An employee communicates that he or she has been exposed to a chemical and is experiencing physical symptoms, or
- An employee expresses concern that he or she has been exposed to a chemical, or
- An employee identified as being potentially exposed following an event or release regardless of the presence or absence of symptoms.

4.2 Injury and Illness Case Management

- | | |
|-----------------------------|---|
| Case Management Coordinator | <ol style="list-style-type: none">1. Determine OSHA classification of event and make required documentation (see TFC-ESHQ-S_CMLI-C-01). (7.1.2.b)2. Immediately offer a Worker Compensation Claim and facilitate the claim process in accordance with TFC-ESHQ-S_CMLI-CD-03. (7.1.3)3. Interface with appropriate medical treatment facility.4. Interface with the OSMP-Site Occupational Medical Provider. |
|-----------------------------|---|

5.0 DEFINITIONS

No terms or phrases unique to this procedure are used.

6.0 RECORDS

The following ~~confidential record is~~ ~~records are~~ generated during the performance of this procedure:

<u>Record Description</u>	<u>Vital Record</u> <u>Y/N</u>	<u>QA Record</u> <u>Y/N</u>	<u>QA Record</u> <u>Retention</u> <u>L/NP</u>	<u>NARA</u> <u>Retention</u> <u>Schedule</u>	<u>Other</u> <u>Retention</u> <u>Requirements</u>	<u>Records</u> <u>Custodian</u>
<u>CH2M HILL Event Report and Continuation Page (A-6003-580)</u>	<u>N</u>	<u>Y</u>	<u>L</u>	<u>ADM-1.3417.32a</u>	<u>Title 51 RCW</u>	<u>Safety Programs</u>

- ~~Event Report (A-6003-580)~~
- ~~Workers' Compensation Claim.~~

Washington State L&I Claim forms, and the copies of documents forwarded to claim files are not records, as defined in TFC-BSM-IRM DC-C-02. The identified record custodian~~CH2M HILL case management coordinator~~ is responsible for record management retention and retirement in accordance with TFC-BSM-IRM DC-C-02 and TFC-ESHQ-S CMLI-C-01.

7.0 SOURCES

7.1 Requirements

1. 10 CFR 851 "Worker Safety and Health Program."
2. 29 CFR 1904, "Recording and Reporting Occupational Injuries and Illnesses." (S/RID)
 - a. Section 35, Subpart D.a.1.
 - b. Section 39, Subpart E.
3. DOE N 350.6, "Acceptance of Valid Workers' Compensation Claims." (S/RID)
4. DOE O 231.1, "Environment, Safety and Health Reporting." (S/RID)
 - a. Chg. 2, Attachment 1, Section 1.a.
 - b. Chg. 2, Attachment 1, Section 1.b.
5. DOE O 440.1A; 03-27-98, "Worker Protection Management for DOE and Contractor Employees," Attachment 2, Section 9d. (S/RID)

7.2 References

1. ID 110.1A, "Office of River Protection Facility Representative Program."
2. TFC-BSM-HR AT-C-01, "Return to Work."
3. TFC-BSM-HR AT-C-03, "Personal Time Bank and Other Absences."

4. [TFC-BSM-HR EM-C-04](#), “Reasonable Accommodations for Disability or Work Restrictions.”
5. [TFC-BSM-IRM DC-C-02](#), “Records Management.”
6. [TFC-ESHQ-S CMLI-C-01](#), “Injury and Illness Record Management.”
7. [TFC-ESHQ-S CMLI-CD-03](#), “Workers’ Compensation.”

Figure 1. Responding to Injuries and Illnesses.

